

Debtor **JANICE ANNETTE BROWN**

United States Bankruptcy Court for the **MIDDLE DISTRICT OF TENNESSEE**

[Bankruptcy district]

☐ Check if this is an amended plan

Case number: _____

Chapter 13 Plan

Part 1: Notices

To Debtor(s): This form sets out options that are appropriate in some cases but not in others. The presence of an option does not indicate that the option is appropriate in your circumstances.

To Creditors: Your rights are affected by this plan. Your claim may be reduced, modified, or eliminated.

If you oppose the treatment of your claim or any provision of this plan, you or your attorney must file an objection to confirmation at least 5 days before the meeting of creditors or raise an objection on the record at the meeting of creditors. The Bankruptcy Court may confirm this plan without further notice if no timely objection to confirmation is made. In addition, a timely proof of claim must be filed before your claim will be paid under the plan.

Debtor(s) must check one box on each line to state whether the plan includes each of the following items. If an item is not checked as "Included" or if both boxes are checked, the provision will not be effective if set out later in the plan.

1.1	A limit on the amount of a secured claim, set out in § 3.2, which may result in partial payment or no payment to the secured creditor.	<input type="checkbox"/> Included	<input checked="" type="checkbox"/> Not Included
1.2	Avoidance of a judicial lien or nonpossessory, nonpurchase-money security interest, set out in § 3.4.	<input checked="" type="checkbox"/> Included	<input type="checkbox"/> Not Included
1.3	Nonstandard provisions, set out in Part 9.	<input type="checkbox"/> Included	<input checked="" type="checkbox"/> Not Included

Part 2: Plan Payments and Length of Plan

2.1 Debtor(s) will make payments to the trustee as follows:

Payments made by	Amount of each payment	Frequency of payments	Duration of payments	Method of payment
<input checked="" type="checkbox"/> Debtor 1	\$660.00	monthly	60 months	<input checked="" type="checkbox"/> Debtor will make payment directly to trustee
<input type="checkbox"/> Debtor 2				<input type="checkbox"/> Debtor consents to payroll deduction from:

Insert additional lines as needed.

2.2 Income tax refunds.

Check one.

- ☐ Debtor(s) will retain any income tax refunds received during the plan term.
- ☒ Debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing the return and will turn over to the trustee all income tax refunds received during the plan term.
- ☐ Debtor(s) will treat income refunds as follows:

2.3 Additional payments.

Check one.

- ☒ **None.** If "None" is checked, the rest of § 2.3 need not be completed or reproduced.

2.4 The total amount of estimated payments to the trustee provided for in §§ 2.1 and 2.3 is \$39,600.00.

Part 3: Treatment of Secured Claims

3.1 Maintenance of payments and cure of default. Check one.

- ☒ **None.** If "None" is checked, the rest of § 3.1 need not be completed or reproduced.

3.2 Request for valuation of security and claim modification. *Check one.*

☒ **None.** If "None" is checked, the rest of § 3.2 need not be completed or reproduced.

3.3 Secured claims excluded from 11 U.S.C. § 506. *Check one.*

☐ **None.** If "None" is checked, the rest of § 3.3 need not be completed or reproduced.
☒ The claims listed below were either:

- (1) incurred within 910 days before the petition date and secured by a purchase money security interest in a motor vehicle acquired for the personal use of the debtor(s), or
- (2) incurred within 1 year before the petition date and secured by a purchase money security interest in any other thing of value.

These claims will be paid in full through the trustee as stated below. The claim amount stated on a proof of claim filed in accordance with the Bankruptcy Rules controls over any contrary amount listed below.

If relief from the automatic stay is ordered as to any collateral listed below, all payments under this section to creditors secured by that collateral will cease.

Name of Creditor	Collateral	Amount of claim	Interest rate	Monthly plan payment
Regional Acceptance Co	2021 KIA K5 25,000 miles UNDER 910	\$27,976.00	4.75%	\$525.00

Insert additional claims as needed.

3.4 Lien avoidance. *Check one.*

☐ **None.** If "None" is checked, the rest of § 3.4 need not be completed or reproduced.
The remainder of this section will be effective only if the applicable box in § 1.2 is checked

☒ The judicial liens or nonpossessory, nonpurchase money security interests listed below impair exemptions to which the debtor(s) would be entitled under 11 U.S.C. § 522(b). The judicial liens or security interests listed below will be avoided to the extent they impair exemptions upon entry of the order confirming the plan. The amount of the judicial lien or security interest that is avoided will be treated as an unsecured claim under § 5.1. The amount, if any, of the judicial lien or security interest that is not avoided will be paid in full as a secured claim under the plan.

Information regarding judicial lien or security interest	Calculation of lien avoidance	Treatment of remaining secured claim
Name of Creditor Covington Credit 0036	a. Amount of lien	\$1,651.00
	b. Amount of all other liens	\$7479.00
	c. Value of claimed exemptions	\$550.00
	d. Total of adding lines a, b, and c	\$9,680.00
Collateral 2 TVS 200, LAPTOP 200, 2 RINGS 150		Interest rate (if applicable) 0.00 %
Lien identification (such as judgment date, date of lien recording, book and page number) Agreement, VOID LIEN Opened 05/22 Last Active 5/31/22	e. Value of debtor's interest in property	-\$550.00
	f. Subtract line e from line d.	\$9,130.00
		Monthly plan payment \$0.00

Extent of exemption impairment
(Check applicable box)

☒ **Line f is equal to or greater than line a.**

The entire lien is avoided *(Do not complete the next column)*

Estimated total payments on secured claim
\$0.00

☐ **Line f is less than line a.**

A portion of the lien is avoided. *(Complete the next column)*

Name of Creditor	a. Amount of lien	\$6,085.00	Amount of secured claim after
------------------	-------------------	------------	-------------------------------

Debtor	JANICE ANNETTE BROWN	Case number	
--------	-----------------------------	-------------	--

Republic Finance	b. Amount of all other liens	\$672.00	avoidance (line a minus line f) \$0.00
Collateral 2 TVS 200, LAPTOP 200, 2 RINGS 150	c. Value of claimed exemptions	\$550.00	Interest rate (if applicable) 0.00 %
	d. Total of adding lines a, b, and c	\$7,307.00	
Lien identification (such as judgment date, date of lien recording, book and page number) Agreement, VOID LIEN Opened 07/21 Last Active 06/22	e. Value of debtor's interest in property	-\$550.00	
	f. Subtract line e from line d.	\$6757.00	Monthly plan payment \$0.00
Extent of exemption impairment (Check applicable box) <input checked="" type="checkbox"/> Line f is equal to or greater than line a. The entire lien is avoided (Do not complete the next column)			Estimated total payments on secured claim \$0.00
<input type="checkbox"/> Line f is less than line a. A portion of the lien is avoided. (Complete the next column)			

Name of Creditor World Finance Company	a. Amount of lien	\$672.00	Amount of secured claim after avoidance (line a minus line f) \$0.00
Collateral 2 TVS 200, LAPTOP 200, 2 RINGS 150	b. Amount of all other liens	\$6757.00	Interest rate (if applicable) 0.00 %
	c. Value of claimed exemptions	\$550.00	
	d. Total of adding lines a, b, and c	\$7979.00	
Lien identification (such as judgment date, date of lien recording, book and page number) Agreement, VOID LIEN Opened 02/22 Last Active 5/20/22	e. Value of debtor's interest in property	-\$550.00	
	f. Subtract line e from line d.	\$7479.00	Monthly plan payment \$0.00
Extent of exemption impairment (Check applicable box) <input checked="" type="checkbox"/> Line f is equal to or greater than line a. The entire lien is avoided (Do not complete the next column)			Estimated total payments on secured claim \$0.00
<input type="checkbox"/> Line f is less than line a. A portion of the lien is avoided. (Complete the next column)			

Name of Creditor Mariner Finance	a. Amount of lien	\$672.00	Amount of secured claim after avoidance (line a minus line f) \$0.00
Collateral 2 TVS 200, LAPTOP 200, 2 RINGS 150	b. Amount of all other liens	\$0.00	Interest rate (if applicable) 0.00 %
	c. Value of claimed exemptions	\$550.00	
	d. Total of adding lines a, b, and c	\$1222.00	
Lien identification (such as judgment date, date of lien recording, book and page number) Agreement, VOID LIEN Opened 08/21 Last Active 12/21	e. Value of debtor's interest in property	-\$550.00	
	f. Subtract line e from line d.	\$672.00	Monthly plan payment \$0.00
Extent of exemption impairment			

Debtor

JANICE ANNETTE BROWN

Case number

(Check applicable box)☒ **Line f is equal to or greater than line a.**The entire lien is avoided *(Do not complete the next column)***Estimated total payments on
secured claim
\$0.00**☐ **Line f is less than line a.**A portion of the lien is avoided. *(Complete the next column)*

Insert additional claims as needed.

3.5 Surrender of collateral. *Check one.*☐**None.** If "None" is checked, the rest of § 3.5 need not be completed or reproduced.☒

The debtor(s) surrender to each creditor below the listed collateral. Upon confirmation of this plan the stay under 11 U.S.C. § 362(a) will be terminated as to the collateral only and the stay under § 1301 will be terminated in all respects. Any allowed unsecured claim resulting from disposition of surrendered collateral will be treated as an unsecured claim under § 5.1.

Name of Creditor	Collateral	Anticipated Deficiency
CAPITAL RECOVERY	2017 KIA OPTIMA 120,000 miles SURRENDER	\$0.00
Mariner Finance	2ND LIEN ON 2017 KIA OPTIMA 120,000 miles SURRENDER	\$0.00

Insert additional claims as needed.

Part 4: Treatment of Priority Claims (including Attorney's Fees and Domestic Support Obligations)**4.1 Attorney's fees.**The balance of the fees owed to the attorney for the debtor(s) is estimated to be **\$4,250.00**. The remaining fees and any additional fees that may be awarded shall be paid through the trustee as specified below. Check one.☒ The attorney for the debtor(s) shall receive a monthly payment of \$.102.00☐ The attorney for the debtor(s) shall receive available funds.**4.2 Domestic support obligations.****(a) Pre- and postpetition domestic support obligations to be paid in full.** *Check one.*☒**None.** If "None" is checked, the rest of § 4.2(a) need not be completed or reproduced.**(b) Domestic support obligations assigned or owed to a governmental unit and paid less than full amount.** *Check one.*☒**None.** If "None" is checked, the rest of § 4.2(b) need not be completed or reproduced.**4.3 Other priority claims.** *Check one.*☒**None.** If "None" is checked, the rest of § 4.3 need not be completed or reproduced.**Part 5: Treatment of Nonpriority Unsecured Claims and Postpetition Claims****5.1 Nonpriority unsecured claims not separately classified.**

Allowed nonpriority unsecured claims that are not separately classified will be paid, pro rata. If more than one option is checked, the option providing the largest payment will be effective. Check all that apply.

☐

The sum of \$

☒**1** % of the total amount of these claims.☐

The funds remaining after disbursements have been made to all other creditors provided for in this plan.

5.2 Interest on allowed nonpriority unsecured claims not separately classified. *Check one.*

Debtor

JANICE ANNETTE BROWN

Case number

**None.** If "None" is checked, the rest of § 5.2 need not be completed or reproduced.**5.3 Maintenance of payments and cure of any default on nonpriority unsecured claims. Check one.****None.** If "None" is checked, the rest of § 5.3 need not be completed or reproduced.**5.4 Separately classified nonpriority unsecured claims. Check one.****None.** If "None" is checked, the rest of § 5.4 need not be completed or reproduced.**5.5 Postpetition claims allowed under 11 U.S.C. § 1305.**

Claims allowed under 11 U.S.C. § 1305 will be paid in full through the trustee.

Part 6: Executory Contracts and Unexpired Leases**6.1 The executory contracts and unexpired leases listed below are assumed and will be treated as specified. All other executory contracts and unexpired leases are rejected. Check one.****None.** If "None" is checked, the rest of § 6.1 need not be completed or reproduced.**Assumed contracts or leases.** Current installment payments will be disbursed by the trustee or directly by the debtor, as specified below. Arrearage payments will be paid in full through the trustee. Amounts stated on a proof of claim filed in accordance with the Bankruptcy Rules control over any contrary amounts listed below as to the installment payment and arrearage.

Name of Creditor	Description of leased property or executory contract	Current installment payment	Amount of arrearage to be paid
ASAM AZIZ/APARTM ENTS.COM	RESIDENTIAL LEASE	\$850.00	\$0.00
		Disbursed by: <input type="checkbox"/> Trustee <input checked="" type="checkbox"/> Debtor(s)	
AT&T	CELL PHONE CONTRACT	\$109.00	\$0.00
		Disbursed by: <input type="checkbox"/> Trustee <input checked="" type="checkbox"/> Debtor(s)	

*Insert additional claims as needed.***Part 7: Order of Distribution of Available Funds by Trustee****7.1 The trustee will make monthly disbursements of available funds in the order specified. Check one.**☐ **Alternative order of distribution:**

CLASS I FILING FEE AND NOTICE FEE
 CLASS II ATTORNEY FEE
 CLASS III SECURED CREDITOR
 CLASS IV SUCCESS INCENTIVE
 CLASS V GENERAL UNSECURED
 CLASS VI 1305 CLAIMS

*Insert additional lines as needed.***Part 8: Vesting of Property of the Estate**

Debtor JANICE ANNETTE BROWN

Case number _____

8.1 Property of the estate will vest in the debtor(s) upon discharge or closing of the case, whichever occurs earlier, unless an alternative vesting date is selected below. Check the applicable box to select an alternative vesting date:

Check the applicable box:

☐ plan confirmation.

☐ other: _____

Part 9: Nonstandard Plan Provisions

☒ **None.** If "None" is checked, the rest of § 6.1 need not be completed or reproduced.

Part 10: Signatures:

X /s/ Daniel T. Castagna
Daniel T. Castagna 22721
Signature of Attorney for Debtor(s)

Date June 30, 2022

X /s/ JANICE ANNETTE BROWN
JANICE ANNETTE BROWN

Date June 30, 2022

X _____

Date _____

Signature(s) of Debtor(s) (required if not represented by an attorney; otherwise optional)

By filing this document, the Attorney for Debtor(s) or Debtor(s) themselves, if not represented by an attorney, also certify(ies) that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in the form required under the Local Rules for the Bankruptcy Court for the Middle District of Tennessee, other than any nonstandard provisions included in Part 9.